

MULTIPLE DEPENDENT CLAIM
FEE CALCULATION SHEET

SERIAL NO. 106574610

APPLICANT(S)

FILING DATE 9-01-03

CLAIMS

	AS FILED		AFTER 1ST AMENDMENT		AFTER 2ND AMENDMENT	
	IND	DEP	IND	DEP	IND	DEP
1	/					
2	/					
3	/					
4	/					
5	/					
6	2					
7	2					
8	2					
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10	2					
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50						
TOTAL IND.	/					
TOTAL DEP.	14					
TOTAL CLAIMS	15					

CLAIMS	IND		DEP		IND		DEP	
	IND	DEP	IND	DEP	IND	DEP	IND	DEP
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TOTAL CLAIMS								